

CAMPAIGN CONTRIBUTIONS AND EXPENSES REPORT

State of Nevada

Name (print) BOB WOLF Office (if applicable) INGRID Trustee District (if applicable) WASHOE COUNTY
 Mailing Address (include city and zip code) 596 TYNER WAY, INCLINE VILLAGE, NV 89451 Telephone No. (775) 831-4121
 E-Mail Address BEWOLF@NUDETR.ORG

Select Appropriate Box(es) ☒ CANDIDATE ☐ PAC ☐ BAG ☐ POL PRY ☐ IND EXP ☐ AMENDED ☐ ANNUAL FILING

☐ **Annual Filing - Due January 15, 2004**

Period: January 1, 2003 - December 31, 2003

☒ **Report #1 - Due August 31, 2004**

Incumbents in an Office with a 4-year term Period: Jan. 5, 2001 - Aug. 26, 2004
 Incumbents in an Office with a 6-year term Period: Dec. 20, 1998 - Aug. 26, 2004
 All others Period: Jan. 1, 2004 - Aug. 26, 2004
 Ballot Advocacy Groups (BAGs) only: Period: Dec. 5, 2002 - Aug. 26, 2004

☐ **Report #2 Due - October 26, 2004**

Period: Aug. 27, 2004 - Oct. 21, 2004

☐ **Report #3 Due - January 15, 2005***

Period: Oct. 22, 2004 - Dec. 31, 2004

BAGs only: Period: Oct. 22, 2004 - Dec. 5, 2004

☐ **Annual Filing - Due January 15, 2005**

Period: January 1, 2004 - December 31, 2004

* Third Report suffices for 2005 Annual Filing if candidate also filed Report Nos. 1 and 2

REC 8/31

FOR OFFICE USE ONLY

CONTRIBUTIONS SUMMARY

- Total Monetary Contributions Received in Excess of \$100
2. Total Monetary Contributions Received of \$100 or Less

This Period	Cumulative From Beginning of Report Period #1 through End of This Reporting Period
- 0 -	
- 0 -	

3. Total Amount of Monetary Contributions Received
(Add Lines 1 and 2)
4. Total Value of In Kind Contributions Received in Excess of \$100

This Period	Cumulative From Beginning of Report Period #1 Through End of This Reporting Period
- 0 -	

EXPENSES SUMMARY

5. Total Monetary Expenses Paid in Excess of \$100
6. Total Monetary Expenses Paid of \$100 or Less
7. Total Amount of All Monetary Expenses Paid
(Add Lines 5 and 6)
8. Total Value of In Kind Expenses in Excess of \$100

130	65
60	-
190	
- 0 -	

AFFIRMATION

I Declare Under Penalty of Perjury That the Foregoing is True and Correct.

Signature

Date

EL201.doc

Revised: Jan-04

PAGE 1 OF 3

Report Period # /

**Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100
Transfer Total Amount of All Campaign Contributions to Line 1 of Contributions Summary**

This page may be copied or duplicated if additional space is needed.

CAMPAIGN EXPENSES

Report Period # /

BOB WOLF LEGISLATIVE TRUSTEE
 Name (print) Office (if applicable) District (if applicable)

Expenses in Excess of \$100

Transfer Total Amount of All Campaign Expenses to Line 5 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY (See Previous Page) NRS 294A.365	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE
North Lake Tahoe BONANZA	D	8/24/04	\$130.65

This page may be copied or duplicated if additional space is needed.

CAMPAIGN CONTRIBUTIONS AND EXPENSES REPORT

State of Nevada

BOB WOLF IN.G.I.D. TRUSTEE

Name (print)

Office (if applicable)

District (if applicable)

596 TURNER WAY, INCLINE VILLAGE, NV 89451 (75) 854-4121

Mailing Address (include city and zip code)

Telephone No.

E-Mail Address

Select Appropriate Box(es) ☒ CANDIDATE ☐ PAC ☐ BAG ☐ POL PRTY ☐ IND EXP ☐ AMENDED ☐ ANNUAL FILING☐ Annual Filing - Due January 15, 2004

Period: January 1, 2003 - December 31, 2003

☐ Report #1 - Due August 31, 2004

Incumbents in an Office with a 4-year term

Period: Jan. 5, 2001 - Aug 26, 2004

Incumbents in an Office with a 6-year term

Period: Dec. 20, 1998 - Aug 26, 2004

All others

Period: Jan. 1, 2004 - Aug. 26, 2004

Ballot Advocacy Groups (BAGs) only:

Period: Dec. 5, 2002 - Aug 26, 2004

☒ Report #2 Due - October 26, 2004

Period: Aug. 27, 2004 - Oct. 21, 2004

☐ Report #3 Due January 15, 2005*

Period: Oct. 22, 2004 - Dec. 31, 2004

BAGs only:

Period: Oct. 22, 2004 - Dec. 5, 2004

☐ Annual Filing - Due January 15, 2005

Period: January 1, 2004 - December 31, 2004

* Third Report suffices for 2005 Annual Filing if candidate also filed Report Nos. 1 and 2

CONTRIBUTIONS SUMMARY

Total Monetary Contributions Received in Excess of \$100

Total Monetary Contributions Received of \$100 or Less

Total Amount of Monetary Contributions Received

(Add Lines 1 and 2)

Total Value of In Kind Contributions Received in Excess of \$100

This Period

Cumulative From Beginning of Report Period #1 through End of This Reporting Period

This Period

Cumulative From Beginning of Report Period #1 Through End of This Reporting Period

EXPENSES SUMMARY

5. Total Monetary Expenses Paid in Excess of \$100

6. Total Monetary Expenses Paid of \$100 or Less

7. Total Amount of All Monetary Expenses Paid (Add Lines 5 and 6)

8. Total Value of In Kind Expenses in Excess of \$100

826.33

581.93

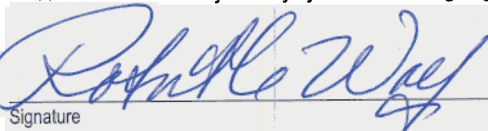
156.61

938.51

982.94

AFFIRMATION

I Declare Under Penalty of Perjury That the Foregoing is True and Correct.



Signature

10/25/04

Date

Report Period # 2

Report Period # 2

BOB WOLF JUGID TRUSTEE
Name (print) Office (if applicable) District (if applicable)

**Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100
Transfer Total Amount of All Campaign Contributions to Line 1 of Contributions Summary**

[illegible]

This page may be copied or duplicated if additional space is needed.

BOB WOLF
Name (print)IRVING TRUSTEE
Office (if applicable)

District (if applicable)

Expense Categories

CATEGORIES	CODE
Office expenses	A
Expenses related to volunteers	B
Expenses related to travel	C
Expenses related to advertising	D
Expenses related to paid staff	E
Expenses related to consultants	F
Expenses related to polling	G
Expenses related to special events	H
** Goods and services provided in kind for which money would otherwise have been paid	I
Other miscellaneous expenses	J
Expenses related to NRS 294A.160 (Disposition of Unspent Contributions)	K

**** NRS 294A.362 requires "In Kind" contributions and expenses to be reported on a separate form, which is attached.**

District (if applicable)

Report Period # 2

District (if applicable)

**Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100
Transfer Total Value of All In-Kind Campaign Contributions to Line 4 of Contributions Summary**

[illegible]

PAGE 5 OF 6

Bob Wolf
Name (print)IGID TRUSTEE
Office (if applicable)

District (if applicable)

IN KIND

Expenses in Excess of \$100

Transfer Total Value of All In-Kind Campaign Expenses to Line 8 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE IN KIND GOOD(S) OR SERVICE(S)	DESCRIPTION OF EACH IN KIND EXPENSE	DATE OF EACH IN KIND EXPENSE	VALUE OR COST OF EACH IN KIND EXPENSE
N/A			

This page may be copied or duplicated if additional space is needed.

DEAN HELLER
Secretary of State

STATE OF NEVADA

CHARLES E. MOORE
Securities Administrator

RENEE L. PARKER
Chief Deputy Secretary
of State



SCOTT W. ANDERSON
Deputy Secretary
for Commercial Recordings

PAMELA A. RUCKEL
Deputy Secretary for
Southern Nevada

RONDA L. MOORE
Deputy Secretary
for Elections

OFFICE OF THE
SECRETARY OF STATE

October 13, 2004

Dear Candidate/Elected Official

I am confident that you share my conviction that campaign finance reporting should be complete and meaningful to promote open government and trust in our democratic process. It is critical that public disclosure of campaign finances be both transparent and understandable, not a pale imitation of the intent of the law. Unfortunately, the form approved by the Legislative Commission does not include information that is necessary to achieve meaningful disclosure of campaign contributions and expenses. Accordingly, as Secretary of State, I am requesting that you make voluntary disclosure of all your campaign funds, including beginning and ending balances, by submitting the following information and affixing your signature below.

Name: BOB WOLF Office Sought or Held: INVIGIL TRUSTEE

Signature: [Signature] Date: 10-25-04

(A) Cash on Hand at **beginning** of this reporting period, which ends Oct. 21, 2004: \$ - 0 -

(B) Interest and Income Earned on Contributions during this period \$ 0

(C) Total Amount of Monetary Contributions Received during this period: \$ - 0 -
(Add figure in Line 3 of C & E Report to any Interest or Income earned) \$ \$ 982,94

(D) Total Amount of All Monetary Expenses Paid during this period \$ 758.54
(Figure from Line 7 of C & E Report)

(E) Ending Cash on Hand on October 21, 2004: \$ C

Thank you for taking the time to respond to our request. You have demonstrated your desire to have meaningful disclosure of your campaign contributions and expenses.

My office will be compiling a list of those candidates/elected officials who voluntarily provide full disclosure of campaign monies, as well as those who decline to do so, and this information will be posted on our website for the public to view.

Respectfully submitted,

[Signature]

DEAN HELLER
Secretary of State

LAS VEGAS OFFICES
555 E. Washington Avenue, 89101
SECURITIES: SUITE 5200
Telephone (702) 486-2440
Fax (702) 486-2452
CORPORATIONS: SUITE 4000
Telephone (702) 486-2880
Fax (702) 486-2888

MAIN OFFICE
101 N. Carson Street, Suite 3
Carson City, Nevada 89701
Telephone (775) 684-5708
Fax (775) 684-5725

**CORPORATE
SATELLITE OFFICE**
202 N. Carson Street
Carson City, Nevada 89701
Telephone (775) 684-5708
Fax (775) 684-5725

CAMPAIGN CONTRIBUTIONS AND EXPENSES REPORT

State of Nevada

BOB WOLF INVIGID TRUSTEE

Name (print)

Office (if applicable)

District (if applicable)

596 TYNER WAY, INCLINE VILLAGE, NV 89451 (775) 831-4121

Mailing Address (include city and zip code)

Telephone No.

E-Mail Address

Select Appropriate Box(es) ☒ CANDIDATE ☐ PAC ☐ BAG ☐ POL PRY ☐ IND EXP ☐ AMENDED ☐ ANNUAL FILING

☐ **Annual Filing - Due January 15, 2004**

Period: January 1, 2003 - December 31, 2003

☐ **Report #1 - Due August 31, 2004**

Incumbents in an Office with a 4-year term Period: Jan. 5, 2001 - Aug 26, 2004
Incumbents in an Office with a 6-year term Period: Dec. 20, 1998 - Aug 26, 2004
All others Period: Jan. 1, 2004 - Aug. 26, 2004
Ballot Advocacy Groups (BAGs) only: Period: Dec. 5, 2002 - Aug 26, 2004

☐ **Report #2 Due - October 26, 2004**

Period: Aug. 27, 2004 - Oct. 21, 2004

☒ **Report #3 Due - January 15, 2005***

Period: Oct. 22, 2004 - Dec. 31, 2004

BAGs only: Period: Oct. 22, 2004 - Dec. 5, 2004

☐ **Annual Filing - Due January 15, 2005**

Period: January 1, 2004 - December 31, 2004

* Third Report suffices for 2005 Annual Filing if candidate also filed Report Nos. 1 and 2

CONTRIBUTIONS SUMMARY

Total Monetary Contributions Received in Excess of \$100

Total Monetary Contributions Received of \$100 or Less

This Period

Cumulative
From Beginning
of Report Period
#1 through End
of This
Reporting
Period

- 0 -	
- 0 -	

This Period

Cumulative From
Beginning of
Report Period #1
Through End of
This Reporting
Period

- 0 -

3. Total Amount of Monetary Contributions Received

(Add Lines 1 and 2)

4. Total Value of In Kind Contributions Received in Excess of \$100

- 0 -

- 0 -	
-------	--

EXPENSES SUMMARY

5. Total Monetary Expenses Paid in Excess of \$100

6. Total Monetary Expenses Paid of \$100 or Less

7. Total Amount of All Monetary Expenses Paid (Add Lines 5 and 6)

8. Total Value of In Kind Expenses in Excess of \$100

- 0 -

- 0 -	
#46	90

AFFIRMATION

I Declare Under Penalty of Perjury That the Foregoing is True and Correct.

Bob Wolf
Signature

EL201.doc

Revised: Jan-04

1/10/05

Date

PAGE 1 OF 6

BOB WOLF IVGID TRUSTEE
 Name (print) Office (if applicable) District (if applicable)

Expense Categories

CATEGORIES	CODE
Office expenses	A
Expenses related to volunteers	B
Expenses related to travel	C
Expenses related to advertising	D
Expenses related to paid staff	E
Expenses related to consultants	F
Expenses related to polling	G
Expenses related to special events	H
** Goods and services provided in kind for which money would otherwise have been paid	I
Other miscellaneous expenses	J
Expenses related to NRS 294A.160 (Disposition of Unspent Contributions)	K

**** NRS 294A.362 requires "In Kind" contributions and expenses to be reported on a separate form, which is attached.**

Report Period	#
---------------	---

District (if applicable)

Transfer Total Amount of All Campaign Expenses to Line 5 of Expenses Summary

This page may be copied or duplicated if additional space is needed.

BOB WOLF IVGID TRUSTEE

Name (print)

Office (if applicable)

District (if applicable)

IN KIND

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100
Transfer Total Value of All In-Kind Campaign Contributions to Line 4 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH IN KIND CONTRIBUTION	DESCRIPTION OF EACH IN KIND CONTRIBUTION	VALUE OR COST OF EACH IN KIND CONTRIBUTION	CHECK HERE IF LOAN
N/A				

This page may be copied or duplicated if additional space is needed.

Report Period # 3

District (if applicable)

Transfer Total Value of All In-Kind Campaign Expenses to Line 8 of Expenses Summary

[illegible]

This page may be copied or duplicated if additional space is needed.